| REQUEST FOR PATENT FEE REFUND | | | | |
|---|-------------------|-----------------------|----------|--|
| 1 Date of Request: 11-24-01 2 Serial/Patent # 09/930, 662 | | | | |
| 3 Please refund the following fee(s): | 4 PAPER NUMBER | 5 DATE FILED | 6 AMOUNT | |
| Filing | · | | \$ | |
| Amendment | | | \$ | |
| Extension of Time | | | \$ | |
| Notice of Appeal/Appeal | | · | \$ | |
| X Petition | 3 | 9-18-07 | \$ 130 | |
| Issue | : | | \$ | |
| Cert of Correction/Terminal Disc. | | 13 | \$ | |
| Maintenance | | | \$ | |
| Assignment | | | \$ | |
| Other | | | \$ | |
| | | 7 TOTAL AMOUNT S /3 | | |
| | 8 TO BE I | 8 TO BE REFUNDED BY: | | |
| 10 REASON: | K L | Freasury Check | | |
| Overpayment | С | Credit Deposit A/C #: | | |
| Duplicate Payment | 9 (| ,09-2382 | | |
| No Fee Due (Explanation): | | | | |
| Proves we lost papers | | | | |
| | | | | |
| | | | | |
| 11 REFUND REQUESTED BY: | | | | |
| TYPED/PRINTED NAME: Steven Brantley TITLE: Petitians Atty | | | | |
| SIGNATURE: Males PHONE: 306-5683 | | | | |
| office: Potrices | | | | |
| THIS SPACE RESERVED FOR FINANCE USE ONLY: | | | | |
| APPROVED: Off Olicia Killy DATE: 1230/ | | | | |

Instructions for completion of this form appear on the back. After white and yellow copies to the official file and mail or hand-carry to: After completion, attach

Office of Finance Refund Branch Crystal Park One, Room 802B